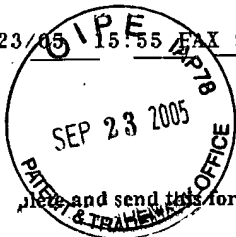


09/23/05 15:55 FAX 9525633001

VIDAS ARRETT STEINKRAUS

003



## PART B - FEE(S) TRANSMITTAL

Please send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
or Fax (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FER ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

490 7590 08/23/2005

VIDAS, ARRETT & STEINKRAUS, P.A.  
6109 BLUE CIRCLE DRIVE  
SUITE 2000  
MINNETONKA, MN 55343-9185

09/26/2005 TBESHAK2 00000021 220350 10023354

01 FC:1501 1400.00 DA  
02 FC:1504 300.00 DA

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Certificate of Mailing or Transmission  
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Robin Peddieson (Depositor's name)  
*Robin Peddieson* (Signature)  
September 23, 2005 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/029,354	10/26/2001	Thomas J. Holman	S63.2-10186-6748-4504	6063

TITLE OF INVENTION: CATHETER WITH REMOVABLE BALLOON PROTECTOR AND STENT DELIVERY SYSTEM WITH REMOVABLE STENT PROTECTOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	11/25/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
HO, UYEN T	3731	606-194000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

BOSTON SCIENTIFIC SCIMED, INC.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Maple Grove, MN 55311-1566

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☐ Advance Order - # of Copies \_\_\_\_\_

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 22-0350 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.  
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Typed or printed name Scott O. Vidas

Date September 23, 2005

Registration No. 30,812

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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138-239897

PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of: Thomas Holman, et al.  
Application No.: 10/029354  
Filed: October 26, 2001  
For: Catheter With Removable Balloon Protector and Stent  
Examiner: Jackie Tan-Uyen T. Ho  
Group Art Unit: 3731

Mail Stop Issue Fee  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Docket No.: S63.2-6748-US04

## FACSIMILE TRANSMITTAL LETTER

DATE: September 23, 2005

TIME: 3:50 PM.

FACSIMILE NO.: 571-273-2885

GROUP ART UNIT: 3731

TOTAL NUMBER OF PAGES (including cover letter): 4

In addition to this 1 page Facsimile Transmittal Letter, following please find  
Part B - Fee Transmittal in duplicate and 1 page Fee Address Indication Form.

Please charge the Issue Fee of \$1,400.00 and Publication fee of \$300.00 to  
Deposit Account No. 22-0350. To the extent that any petition is required to consider this  
communication, please treat this as such a petition.

Respectfully Submitted,

VIDAS, ARRETT &amp; STEINKRAUS, P.A.

Date: September 23, 2005

By: 

Scott Q. Vidas  
Reg. No. 30812

6109 Blue Circle Drive, Suite 2000  
Minnetonka, MN 55343-9185  
Telephone: (952) 563-3000  
Facsimile: (952) 563-3001

## Certificate of Transmission

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and  
Trademark Office, Fax No. 571-273-2885, on September 23, 2005.

Signature: 

Robin Peddieson